

# Union Calendar No. 366

107<sup>TH</sup> CONGRESS  
2D SESSION

# H. R. 4965

[Report No. 107-604]

To prohibit the procedure commonly known as partial-birth abortion.

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## IN THE HOUSE OF REPRESENTATIVES

JUNE 19, 2002

Mr. CHABOT (for himself, Mr. SENSENBRENNER, Mr. BARCIA, Mr. HYDE, Mr. HALL of Texas, Mr. SMITH of New Jersey, Mr. OBERSTAR, Mrs. MYRICK, Mr. STUPAK, Ms. HART, Mr. MOLLOHAN, Mr. PORTMAN, and Mr. RAHALL) introduced the following bill; which was referred to the Committee on the Judiciary

JULY 23, 2002

Additional sponsors: Mr. PENCE, Mr. KERNS, Mr. BRYANT, Mr. BACHUS, Mr. PITTS, Mr. PICKERING, Mr. TIBERI, Mr. SHOWS, Mr. WICKER, Mr. KELLER, Mr. CANTOR, Mr. CAMP, Mr. FERGUSON, Mr. HAYES, Mr. EVERETT, Mr. HALL of Ohio, Mr. MCCRERY, Mr. JEFF MILLER of Florida, Mr. KENNEDY of Minnesota, Mr. GRAVES, Mr. GRUCCI, Mr. SHIMKUS, Mr. RYUN of Kansas, Mr. NORWOOD, Mr. GRAHAM, Mr. CUNNINGHAM, Mr. SULLIVAN, Mr. BARR of Georgia, Mr. NEY, Mr. AKIN, Mr. BURTON of Indiana, Mr. GARY G. MILLER of California, Mr. LINDER, Mr. COSTELLO, Mr. ENGLISH, Mr. SHUSTER, Mr. GREEN of Wisconsin, Mr. WELDON of Pennsylvania, Mr. BARTON of Texas, Mr. WELLER, Mr. WHITFIELD, Mr. DELAY, Mr. GOODE, Mr. MANZULLO, Mr. BUYER, Mr. ADERHOLT, Mr. FLAKE, Mr. ROGERS of Michigan, Mrs. JO ANN DAVIS of Virginia, Mr. GOODLATTE, Mr. JOHN, Mr. BLUNT, Mr. TAYLOR of Mississippi, Mr. SOUDER, Mr. DOOLITTLE, Mr. PHELPS, Mr. ARMEY, Mr. PETRI, Mr. HANSEN, Mr. HILLEARY, Mr. SAM JOHNSON of Texas, Mr. ROEMER, Mr. LEWIS of Kentucky, Mr. STUMP, Mr. WAMP, Mr. GUTKNECHT, Mr. WELDON of Florida, Mr. TIAHRT, Mr. COLLINS, Mr. HULSHOF, Mr. BARTLETT of Maryland, Ms. ROS-LEHTINEN, Mrs. NORTHUP, Mr. LUCAS of Oklahoma, Mr. STEARNS, Mr. WATKINS, Mr. THUNE, Mr. JONES of North Carolina, Mr. HUNTER, Mr. TOOMEY, Mr. SCHROCK, Mr. CRANE, Mr. WATTS of Oklahoma, Mr. VITTER, Mr. STENHOLM, Mr. ISSA, Mr. TERRY, Mr. HOLDEN, Mr. SIMPSON, Mr. PUTNAM,

Mr. BAKER, Mr. TAYLOR of North Carolina, Mr. FORBES, Mr. TANCREDO, Mr. DEMINT, Mr. WILSON of South Carolina, Mr. SESSIONS, Mr. KINGSTON, Mr. UPTON, Mr. BOOZMAN, Mr. LUCAS of Kentucky, Mr. HOSTETTLER, Mr. HAYWORTH, Mr. BROWN of South Carolina, Mr. CANNON, Mrs. EMERSON, Mr. ROGERS of Kentucky, Mr. SCHAFER, Mr. LATOURETTE, Mr. JENKINS, Mr. SMITH of Texas, Mr. OXLEY, Mr. MICA, Mr. CALVERT, Mr. COBLE, Mr. BRADY of Texas, Mr. PETERSON of Pennsylvania, Mr. EHLERS, Mr. HOEKSTRA, Mr. FLETCHER, Mr. LAHOOD, Mr. BALLENGER, Mrs. CUBIN, Mr. SHADEGG, Mr. COOKSEY, Mr. RILEY, Mr. CHAMBLISS, Mr. MORAN of Kansas, Mr. HEFLEY, Mr. OSBORNE, Mr. SHERWOOD, Mr. CULBERSON, Mr. ISTOOK, Mr. SKEEN, Mr. REHBERG, Mr. CRENSHAW, Mr. GANSKE, Mr. GOSS, Mr. PLATTS, Mr. POMBO, Mr. NUSSLE, and Mr. WOLF

JULY 23, 2002

Committed to the Committee of the Whole House on the State of the Union  
and ordered to be printed

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## A BILL

To prohibit the procedure commonly known as partial-birth  
abortion.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

### 3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Partial-Birth Abortion  
5 Ban Act of 2002”.

### 6 **SEC. 2. FINDINGS.**

7 The Congress finds and declares the following:

8 (1) A moral, medical, and ethical consensus ex-  
9 ists that the practice of performing a partial-birth  
10 abortion—an abortion in which a physician delivers  
11 an unborn child’s body until only the head remains  
12 inside the womb, punctures the back of the child’s

1 skull with a sharp instrument, and sucks the child's  
2 brains out before completing delivery of the dead in-  
3 fant—is a gruesome and inhumane procedure that is  
4 never medically necessary and should be prohibited.

5 (2) Rather than being an abortion procedure  
6 that is embraced by the medical community, particu-  
7 larly among physicians who routinely perform other  
8 abortion procedures, partial-birth abortion remains a  
9 disfavored procedure that is not only unnecessary to  
10 preserve the health of the mother, but in fact poses  
11 serious risks to the long-term health of women and  
12 in some circumstances, their lives. As a result, at  
13 least 27 States banned the procedure as did the  
14 United States Congress which voted to ban the pro-  
15 cedure during the 104th, 105th, and 106th Con-  
16 gresses.

17 (3) In *Stenberg v. Carhart*, 530 U.S. 914, 932  
18 (2000), the United States Supreme Court opined  
19 “that significant medical authority supports the  
20 proposition that in some circumstances, [partial  
21 birth abortion] would be the safest procedure” for  
22 pregnant women who wish to undergo an abortion.  
23 Thus, the Court struck down the State of Nebras-  
24 ka’s ban on partial-birth abortion procedures, con-  
25 cluding that it placed an “undue burden” on women

1 seeking abortions because it failed to include an ex-  
2 ception for partial-birth abortions deemed necessary  
3 to preserve the “health” of the mother.

4 (4) In reaching this conclusion, the Court de-  
5 ferred to the Federal district court’s factual findings  
6 that the partial-birth abortion procedure was statis-  
7 tically and medically as safe as, and in many cir-  
8 cumstances safer than, alternative abortion proce-  
9 dures.

10 (5) However, the great weight of evidence pre-  
11 sented at the Stenberg trial and other trials chal-  
12 lenging partial-birth abortion bans, as well as at ex-  
13 tensive Congressional hearings, demonstrates that a  
14 partial-birth abortion is never necessary to preserve  
15 the health of a woman, poses significant health risks  
16 to a woman upon whom the procedure is performed,  
17 and is outside of the standard of medical care.

18 (6) Despite the dearth of evidence in the  
19 Stenberg trial court record supporting the district  
20 court’s findings, the United States Court of Appeals  
21 for the Eighth Circuit and the Supreme Court re-  
22 fused to set aside the district court’s factual findings  
23 because, under the applicable standard of appellate  
24 review, they were not “clearly erroneous”. A finding  
25 of fact is clearly erroneous “when although there is

1 evidence to support it, the reviewing court on the en-  
2 tire evidence is left with the definite and firm convic-  
3 tion that a mistake has been committed”. *Anderson*  
4 *v. City of Bessemer City, North Carolina*, 470 U.S.  
5 564, 573 (1985). Under this standard, “if the dis-  
6 trict court’s account of the evidence is plausible in  
7 light of the record viewed in its entirety, the court  
8 of appeals may not reverse it even though convinced  
9 that had it been sitting as the trier of fact, it would  
10 have weighed the evidence differently”. *Id.* at 574.

11 (7) Thus, in *Stenberg*, the United States Su-  
12 preme Court was required to accept the very ques-  
13 tionable findings issued by the district court judge—  
14 the effect of which was to render null and void the  
15 reasoned factual findings and policy determinations  
16 of the United States Congress and at least 27 State  
17 legislatures.

18 (8) However, under well-settled Supreme Court  
19 jurisprudence, the United States Congress is not  
20 bound to accept the same factual findings that the  
21 Supreme Court was bound to accept in *Stenberg*  
22 under the “clearly erroneous” standard. Rather, the  
23 United States Congress is entitled to reach its own  
24 factual findings—findings that the Supreme Court  
25 accords great deference—and to enact legislation

1 based upon these findings so long as it seeks to pur-  
2 sue a legitimate interest that is within the scope of  
3 the Constitution, and draws reasonable inferences  
4 based upon substantial evidence.

5 (9) In *Katzenbach v. Morgan*, 384 U.S. 641  
6 (1966), the Supreme Court articulated its highly  
7 deferential review of Congressional factual findings  
8 when it addressed the constitutionality of section  
9 4(e) of the Voting Rights Act of 1965. Regarding  
10 Congress’ factual determination that section 4(e)  
11 would assist the Puerto Rican community in “gain-  
12 ing nondiscriminatory treatment in public services,”  
13 the Court stated that “[i]t was for Congress, as the  
14 branch that made this judgment, to assess and  
15 weigh the various conflicting considerations. . . . It  
16 is not for us to review the congressional resolution  
17 of these factors. It is enough that we be able to per-  
18 ceive a basis upon which the Congress might resolve  
19 the conflict as it did. There plainly was such a basis  
20 to support section 4(e) in the application in question  
21 in this case.”. *Id.* at 653.

22 (10) Katzenbach’s highly deferential review of  
23 Congress’s factual conclusions was relied upon by  
24 the United States District Court for the District of  
25 Columbia when it upheld the “bail-out” provisions of

1 the Voting Rights Act of 1965, (42 U.S.C. 1973c),  
2 stating that “congressional fact finding, to which we  
3 are inclined to pay great deference, strengthens the  
4 inference that, in those jurisdictions covered by the  
5 Act, state actions discriminatory in effect are dis-  
6 criminatory in purpose”. *City of Rome, Georgia v.*  
7 *U.S.*, 472 F. Supp. 221 (D. D. Col. 1979) *aff’d* *City*  
8 *of Rome, Georgia v. U.S.*, 446 U.S. 156 (1980).

9 (11) The Court continued its practice of defer-  
10 ring to congressional factual findings in reviewing  
11 the constitutionality of the must-carry provisions of  
12 the Cable Television Consumer Protection and Com-  
13 petition Act of 1992. See *Turner Broadcasting Sys-*  
14 *tem, Inc. v. Federal Communications Commission*,  
15 512 U.S. 622 (1994) (Turner I) and *Turner Broad-*  
16 *casting System, Inc. v. Federal Communications*  
17 *Commission*, 520 U.S. 180 (1997) (Turner II). At  
18 issue in the Turner cases was Congress’ legislative  
19 finding that, absent mandatory carriage rules, the  
20 continued viability of local broadcast television would  
21 be “seriously jeopardized”. The Turner I Court rec-  
22 ognized that as an institution, “Congress is far bet-  
23 ter equipped than the judiciary to ‘amass and evalu-  
24 ate the vast amounts of data’ bearing upon an issue  
25 as complex and dynamic as that presented here”.

1        512 U.S. at 665–66. Although the Court recognized  
2        that “the deference afforded to legislative findings  
3        does ‘not foreclose our independent judgment of the  
4        facts bearing on an issue of constitutional law,’” its  
5        “obligation to exercise independent judgment when  
6        First Amendment rights are implicated is not a li-  
7        cense to reweigh the evidence de novo, or to replace  
8        Congress’ factual predictions with our own. Rather,  
9        it is to assure that, in formulating its judgments,  
10       Congress has drawn reasonable inferences based on  
11       substantial evidence.” *Id.* at 666.

12        (12) Three years later in *Turner II*, the Court  
13        upheld the “must-carry” provisions based upon Con-  
14        gress’ findings, stating the Court’s “sole obligation  
15        is ‘to assure that, in formulating its judgments, Con-  
16        gress has drawn reasonable inferences based on sub-  
17        stantial evidence.’” 520 U.S. at 195. Citing its rul-  
18        ing in *Turner I*, the Court reiterated that “[w]e owe  
19        Congress’ findings deference in part because the in-  
20        stitution ‘is far better equipped than the judiciary to  
21        “amass and evaluate the vast amounts of data”  
22        bearing upon’ legislative questions,” *id.* at 195, and  
23        added that it “owe[d] Congress’ findings an addi-  
24        tional measure of deference out of respect for its au-  
25        thority to exercise the legislative power.” *Id.* at 196.



1           (13) There exists substantial record evidence  
2       upon which Congress has reached its conclusion that  
3       a ban on partial-birth abortion is not required to  
4       contain a “health” exception, because the facts indi-  
5       cate that a partial-birth abortion is never necessary  
6       to preserve the health of a woman, poses serious  
7       risks to a woman’s health, and lies outside the  
8       standard of medical care. Congress was informed by  
9       extensive hearings held during the 104th and 105th  
10      Congresses and passed a ban on partial-birth abor-  
11      tion in the 104th, 105th, and 106th Congresses.  
12      These findings reflect the very informed judgment of  
13      the Congress that a partial-birth abortion is never  
14      necessary to preserve the health of a woman, poses  
15      serious risks to a woman’s health, and lies outside  
16      the standard of medical care, and should, therefore,  
17      be banned.

18           (14) Pursuant to the testimony received during  
19      extensive legislative hearings during the 104th and  
20      105th Congresses, Congress finds and declares that:

21           (A) Partial-birth abortion poses serious  
22      risks to the health of a woman undergoing the  
23      procedure. Those risks include, among other  
24      things: an increase in a woman’s risk of suf-  
25      fering from cervical incompetence, a result of

1 cervical dilation making it difficult or impos-  
2 sible for a woman to successfully carry a subse-  
3 quent pregnancy to term; an increased risk of  
4 uterine rupture, abruption, amniotic fluid embo-  
5 lus, and trauma to the uterus as a result of  
6 converting the child to a footling breech posi-  
7 tion, a procedure which, according to a leading  
8 obstetrics textbook, “there are very few, if any,  
9 indications for . . . other than for delivery of  
10 a second twin”; and a risk of lacerations and  
11 secondary hemorrhaging due to the doctor  
12 blindly forcing a sharp instrument into the base  
13 of the unborn child’s skull while he or she is  
14 lodged in the birth canal, an act which could re-  
15 sult in severe bleeding, brings with it the threat  
16 of shock, and could ultimately result in mater-  
17 nal death.

18 (B) There is no credible medical evidence  
19 that partial-birth abortions are safe or are safer  
20 than other abortion procedures. No controlled  
21 studies of partial-birth abortions have been con-  
22 ducted nor have any comparative studies been  
23 conducted to demonstrate its safety and efficacy  
24 compared to other abortion methods. Further-  
25 more, there have been no articles published in

1 peer-reviewed journals that establish that par-  
2 tial-birth abortions are superior in any way to  
3 established abortion procedures. Indeed, unlike  
4 other more commonly used abortion procedures,  
5 there are currently no medical schools that pro-  
6 vide instruction on abortions that include the  
7 instruction in partial-birth abortions in their  
8 curriculum.

9 (C) A prominent medical association has  
10 concluded that partial-birth abortion is “not an  
11 accepted medical practice,” that it has “never  
12 been subject to even a minimal amount of the  
13 normal medical practice development,” that  
14 “the relative advantages and disadvantages of  
15 the procedure in specific circumstances remain  
16 unknown,” and that “there is no consensus  
17 among obstetricians about its use”. The asso-  
18 ciation has further noted that partial-birth  
19 abortion is broadly disfavored by both medical  
20 experts and the public, is “ethically wrong,”  
21 and “is never the only appropriate procedure”.

22 (D) Neither the plaintiff in *Stenberg v.*  
23 *Carhart*, nor the experts who testified on his  
24 behalf, have identified a single circumstance

1 during which a partial-birth abortion was nec-  
2 essary to preserve the health of a woman.

3 (E) The physician credited with developing  
4 the partial-birth abortion procedure has testi-  
5 fied that he has never encountered a situation  
6 where a partial-birth abortion was medically  
7 necessary to achieve the desired outcome and,  
8 thus, is never medically necessary to preserve  
9 the health of a woman.

10 (F) A ban on the partial-birth abortion  
11 procedure will therefore advance the health in-  
12 terests of pregnant women seeking to terminate  
13 a pregnancy.

14 (G) In light of this overwhelming evidence,  
15 Congress and the States have a compelling in-  
16 terest in prohibiting partial-birth abortions. In  
17 addition to promoting maternal health, such a  
18 prohibition will draw a bright line that clearly  
19 distinguishes abortion and infanticide, that pre-  
20 serves the integrity of the medical profession,  
21 and promotes respect for human life.

22 (H) Based upon *Roe v. Wade*, 410 U.S.  
23 113 (1973) and *Planned Parenthood v. Casey*,  
24 505 U.S. 833 (1992), a governmental interest  
25 in protecting the life of a child during the deliv-

1           ery process arises by virtue of the fact that dur-  
2           ing a partial-birth abortion, labor is induced  
3           and the birth process has begun. This distinc-  
4           tion was recognized in Roe when the Court  
5           noted, without comment, that the Texas partu-  
6           rition statute, which prohibited one from killing  
7           a child “in a state of being born and before ac-  
8           tual birth,” was not under attack. This interest  
9           becomes compelling as the child emerges from  
10          the maternal body. A child that is completely  
11          born is a full, legal person entitled to constitu-  
12          tional protections afforded a “person” under  
13          the United States Constitution. Partial-birth  
14          abortions involve the killing of a child that is in  
15          the process, in fact mere inches away from, be-  
16          coming a “person”. Thus, the government has  
17          a heightened interest in protecting the life of  
18          the partially-born child.

19               (I) This, too, has not gone unnoticed in  
20          the medical community, where a prominent  
21          medical association has recognized that partial-  
22          birth abortions are “ethically different from  
23          other destructive abortion techniques because  
24          the fetus, normally twenty weeks or longer in  
25          gestation, is killed outside of the womb”. Ac-

1 cording to this medical association, the “‘par-  
2 tial birth’ gives the fetus an autonomy which  
3 separates it from the right of the woman to  
4 choose treatments for her own body”.

5 (J) Partial-birth abortion also confuses the  
6 medical, legal, and ethical duties of physicians  
7 to preserve and promote life, as the physician  
8 acts directly against the physical life of a child,  
9 whom he or she had just delivered, all but the  
10 head, out of the womb, in order to end that life.  
11 Partial-birth abortion thus appropriates the ter-  
12 minology and techniques used by obstetricians  
13 in the delivery of living children—obstetricians  
14 who preserve and protect the life of the mother  
15 and the child—and instead uses those tech-  
16 niques to end the life of the partially-born child.

17 (K) Thus, by aborting a child in the man-  
18 ner that purposefully seeks to kill the child  
19 after he or she has begun the process of birth,  
20 partial-birth abortion undermines the public’s  
21 perception of the appropriate role of a physician  
22 during the delivery process, and perverts a  
23 process during which life is brought into the  
24 world, in order to destroy a partially-born child.

1           (L) The gruesome and inhumane nature of  
2           the partial-birth abortion procedure and its dis-  
3           turbng similarity to the killing of a newborn in-  
4           fant promotes a complete disregard for infant  
5           human life that can only be countered by a pro-  
6           hibition of the procedure.

7           (M) The vast majority of babies killed dur-  
8           ing partial-birth abortions are alive until the  
9           end of the procedure. It is a medical fact, how-  
10          ever, that unborn infants at this stage can feel  
11          pain when subjected to painful stimuli and that  
12          their perception of this pain is even more in-  
13          tense than that of newborn infants and older  
14          children when subjected to the same stimuli.  
15          Thus, during a partial-birth abortion procedure,  
16          the child will fully experience the pain associ-  
17          ated with piercing his or her skull and sucking  
18          out his or her brain.

19          (N) Implicitly approving such a brutal and  
20          inhumane procedure by choosing not to prohibit  
21          it will further coarsen society to the humanity  
22          of not only newborns, but all vulnerable and in-  
23          nocent human life, making it increasingly dif-  
24          ficult to protect such life. Thus, Congress has

1 a compelling interest in acting—indeed it must  
 2 act—to prohibit this inhumane procedure.

3 (O) For these reasons, Congress finds that  
 4 partial-birth abortion is never medically indi-  
 5 cated to preserve the health of the mother; is in  
 6 fact unrecognized as a valid abortion procedure  
 7 by the mainstream medical community; poses  
 8 additional health risks to the mother; blurs the  
 9 line between abortion and infanticide in the kill-  
 10 ing of a partially-born child just inches from  
 11 birth; and confuses the role of the physician in  
 12 childbirth and should, therefore, be banned.

13 **SEC. 3. PROHIBITION ON PARTIAL-BIRTH ABORTIONS.**

14 (a) IN GENERAL.—Title 18, United States Code, is  
 15 amended by inserting after chapter 73 the following:

16 **“CHAPTER 74—PARTIAL-BIRTH**  
 17 **ABORTIONS**

“Sec.

“1531. Partial-birth abortions prohibited.

18 **“§ 1531. Partial-birth abortions prohibited**

19 “(a) Any physician who, in or affecting interstate or  
 20 foreign commerce, knowingly performs a partial-birth  
 21 abortion and thereby kills a human fetus shall be fined  
 22 under this title or imprisoned not more than 2 years, or  
 23 both. This subsection does not apply to a partial-birth  
 24 abortion that is necessary to save the life of a mother



1 whose life is endangered by a physical disorder, physical  
2 illness, or physical injury, including a life-endangering  
3 physical condition caused by or arising from the pregnancy  
4 itself. This subsection takes effect 1 day after the enact-  
5 ment.

6 “(b) As used in this section—

7 “(1) the term ‘partial-birth abortion’ means an  
8 abortion in which—

9 “(A) the person performing the abortion  
10 deliberately and intentionally vaginally delivers  
11 a living fetus until, in the case of a head-first  
12 presentation, the entire fetal head is outside the  
13 body of the mother, or, in the case of breech  
14 presentation, any part of the fetal trunk past  
15 the navel is outside the body of the mother for  
16 the purpose of performing an overt act that the  
17 person knows will kill the partially delivered liv-  
18 ing fetus; and

19 “(B) performs the overt act, other than  
20 completion of delivery, that kills the partially  
21 delivered living fetus; and

22 “(2) the term ‘physician’ means a doctor of medicine  
23 or osteopathy legally authorized to practice medicine and  
24 surgery by the State in which the doctor performs such  
25 activity, or any other individual legally authorized by the

1 State to perform abortions: Provided, however, That any  
2 individual who is not a physician or not otherwise legally  
3 authorized by the State to perform abortions, but who nev-  
4 ertheless directly performs a partial-birth abortion, shall  
5 be subject to the provisions of this section.

6 “(c)(1) The father, if married to the mother at the  
7 time she receives a partial-birth abortion procedure, and  
8 if the mother has not attained the age of 18 years at the  
9 time of the abortion, the maternal grandparents of the  
10 fetus, may in a civil action obtain appropriate relief, unless  
11 the pregnancy resulted from the plaintiff’s criminal con-  
12 duct or the plaintiff consented to the abortion.

13 “(2) Such relief shall include—

14 “(A) money damages for all injuries, psycho-  
15 logical and physical, occasioned by the violation of  
16 this section; and

17 “(B) statutory damages equal to three times  
18 the cost of the partial-birth abortion.

19 “(d)(1) A defendant accused of an offense under this  
20 section may seek a hearing before the State Medical Board  
21 on whether the physician’s conduct was necessary to save  
22 the life of the mother whose life was endangered by a  
23 physical disorder, physical illness, or physical injury, in-  
24 cluding a life-endangering physical condition caused by or  
25 arising from the pregnancy itself.

1       “(2) The findings on that issue are admissible on that  
 2 issue at the trial of the defendant. Upon a motion of the  
 3 defendant, the court shall delay the beginning of the trial  
 4 for not more than 30 days to permit such a hearing to  
 5 take place.

6       “(e) A woman upon whom a partial-birth abortion is  
 7 performed may not be prosecuted under this section, for  
 8 a conspiracy to violate this section, or for an offense under  
 9 section 2, 3, or 4 of this title based on a violation of this  
 10 section.”.

11       (b) CLERICAL AMENDMENT.—The table of chapters  
 12 for part I of title 18, United States Code, is amended by  
 13 inserting after the item relating to chapter 73 the fol-  
 14 lowing new item:

**“74. Partial-birth abortions ..... 1531”.**

**Union Calendar No. 366**

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Committed to the Committee of the Whole House on the  
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